



LO2 000011379

ACCOUNT NO. : 072100000032

REFERENCE : 570848 7336030

AUTHORIZATION : *Patricia Pigute*

COST LIMIT : \$ 155.00

FILED
02 MAY -9 AM 11:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : May 8, 2002

ORDER TIME : 3:46 PM

ORDER NO. : 570848-005

CUSTOMER NO: 7336030

000005493470--8

CUSTOMER: Mr. Harry Kenney
Topline Printing & Graphics

1770 West 10th Street

West Palm Beach, FL 33404

W02-13406

DOMESTIC FILING

NAME: TOPLINE PLUS, L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS:

AL1

RECEIVED
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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

May 9, 2002

CSC

RESUBMIT
Please give original
submission date as file date.

RECEIVED
02 MAY -9 PM 4:20
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

SUBJECT: TOPLINE PLUS, L.L.C.
Ref. Number: W02000013406

We have received your document for TOPLINE PLUS, L.L.C. and authorization to debit your account in the amount of \$155.00. However, document has not been filed and is being returned for the following:

Your articles of organization reflect your limited liability company will not be managed by the members of the company; however, your articles contain the name(s) and address(es) of the managing member(s). Consequently, you must either amend your articles to reflect the company will be managed by the members or substitute the title of Manager (MGR) for the title of Managing Member (MGRM) throughout your document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 002A00029188

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

TOPLINE PLUS, L.L.C.

A LIMITED LIABILITY COMPANY
(Pursuant to s. 607.407, Florida Statutes)

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TALLAHASSEE, FLORIDA

1. **Name.** The name of the limited liability company is **TOPLINE PLUS, L.L.C.**
2. **Purpose.** The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
3. **Address of Principal Office.** The mailing address and the street address of the principal office of the limited liability company is 1770 West 10th Street, Riviera Beach, Florida 33404.
4. **Term.** Term of this LLC shall be perpetual.
5. **Members at Time of Formation.** There will be at least one member at the time the limited liability company is formed.
6. **Period of Duration.** The period of duration shall be perpetual.
7. **Management.** The Limited Liability Company is to be managed by one managing member. At the time of formation the initial managing member's name and address are as follows:

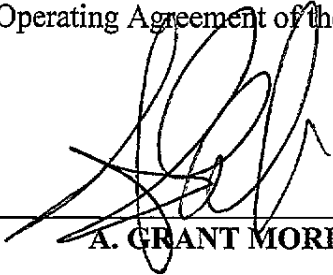
Initial Member:

A. Grant Morris
1770 West 10th Street
Riviera Beach, Florida 33404

8. **Admission of New Members.** With the written unanimous consent of the initial member, new members may be admitted into the LLC upon the payment of such capital contribution and upon such terms as the initial member decides. In the event that new members are admitted into the LLC, the share of each new member in the profits and losses shall be in such proportion as may be agreed upon between all the members and the new member.

9. **Members Right to Continue Business.** The remaining members of the limited liability company shall have the right to continue business on the death, retirement, resignation, expulsion,

bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company as further set forth in the Operating Agreement of the limited liability company



A. GRANT MORRIS, President

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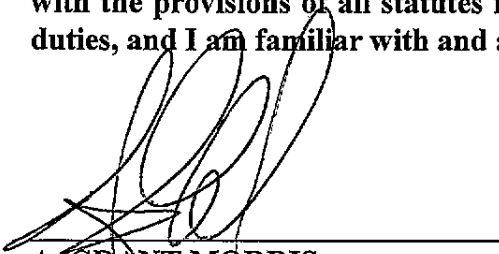
(In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.)

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED
OFFICE**

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned limited liability company submits the following statement to designate a registered office and registered agent in the state of Florida.

1. **Name.** The name of the limited liability company is **TOPLINE PLUS, L.L.C.**
2. **Registered Office.** The address of the registered office of the limited liability company is 1770 West 10th Street, Riviera Beach, Florida 33404.
3. **Registered Agent.** **A. GRANT MORRIS**, by his signature below accepts appointment, to act as the Registered agent of **TOPLINE PLUS, L.L.C.**

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



A. GRANT MORRIS
TopLine Plus, L.L.C.
1770 West 10th Street
Riviera Beach, FL 33404

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